HOLY CO

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION .	INITIALS	. ID NO.	DATE
FEE DETERMINATION	BA -	10385	<del></del>
O.I.P.E. CLASSIFIER		1//	17-25-00
FORMALITY REVIEW	41	526	3/24/00
RESPONSE FORMALITY REVIEW			·

## INDEX OF CLAIMS

,	Rejected	N	Non-elected
	Allowed	ı	Interference
	(Through numeral) Canceled	Α	Appeal
	Restricted	0	Objected

Date

: Restricted U								
Claim MMX	Date	Claim	Date		Claim			
Final Driginal 9/10/0		Final Original			Final			
QY-		51			101			
FILL		52			102			
В		53			103			
4		54			104 .			
Б		55	++++		106			
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		57	<del>┨</del> ┼┼┼┼		108			
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12	╫╫┼┼┼┼┼┼	62	<del>                                     </del>	<del>- - - </del> - -	112			
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		69			119			
(30) JU-		70			120			
	+++++	71			121			
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23		73			123			
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25		75	1-1-1-1		125			
(B)		76	++++		126			
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28		78	<del>           </del>		129			
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31		82	<del>                                     </del>	<del>-   -  </del> -	132			
3		83	<del>                                     </del>	+++	133			
33	<del></del>	84	+- -		134			
35	<del></del>	85	1-1-1-1		135			
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37 <b>J</b>		87			137			
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49		99	<del></del>	<del>   </del>	150			

If more than 150 claims or 10 actions staple additional sheet here